



Atty. Dkt. No. 034536-0741

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Joseph SCHLESSINGER et al.

Title: NOVEL RECEPTOR-TYPE
PHOSPHOTYROSINE
PHOSPHATOASE-KAPPA

Appl. No.: 09/887,669

Filing Date: 10/1/2001

Examiner: Michael T. Brannock

Art Unit: 1646

TRANSMITTAL OF FORMAL DRAWINGS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

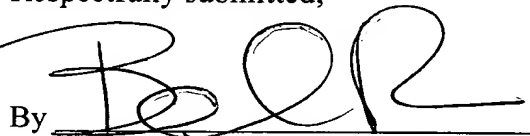
ATTENTION: DRAWING REVIEW BRANCH

Sir:

Transmitted herewith are the formal drawings (37 sheets, Figures 1-24) for the above-identified application. The Official Draftsperson is respectfully requested to approve these drawings for entry into the application.

Respectfully submitted,

Date 7 February 2005

By 

FOLEY & LARDNER LLP
Washington Harbour
3000 K Street, N.W., Suite 500
Washington, D.C. 20007-5143
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Beth A. Burrous
Attorney for Applicant
Registration No. 35,087



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AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith are an Amendment and Transmittal of Formal Drawings in the above-identified application.

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/> Extension for response filed within the first month:	\$120.00	\$120.00
<input type="checkbox"/> Extension for response filed within the second month:	\$450.00	\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$1,020.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,590.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,160.00	\$0.00
EXTENSION FEE TOTAL:		\$120.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$120.00
TOTAL FEE:		\$120.00

☐ Please charge Deposit Account No. 19-0741 in the amount of \$120.00. A duplicate copy of this transmittal is enclosed.

- [X] A check in the amount of \$120.00 is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 7 February 2005

By 

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